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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Α	Application or Docket Number 09/964,999			ing Date 27/2001	☐ To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN	
FOR			JMBER FILED		NUMBER EXTRA		Г	RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		l	N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 =		•		П	x \$ =		OR	x \$ =		
IND (37	EPENDENT CLAIM CFR 1.16(h))		minus 3 = *					x \$ =			x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drawi sheets of paper, the applicat is \$250 (\$125 for small entity additional 50 sheets or fracti 35 U.S.C. 41(a)(1)(G) and 33			size fee due r each hereof. See							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1			
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
	APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT	02/05/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	iLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	- 20	Minus	20		= 0		x s =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 4	Minus	···4		= 0]	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))						1						
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(Column 1) (Column 2) (Column 3)													
_⊢		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSI PAID FOR	R SLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
Ä	Total (37 CFR 1,16())	*	Minus	**		-		x s =		OR	x s =		
AMENDMENT	Independent (37 CFR 1.16(h))	*	Minus	***		=		x \$ =		OR	x \$ =		
핍	Application Size Fee (37 CFR 1.16(s))												
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
Γ										OR	TOTAL ADD'L FEE		
** If	If the entry in column 1 is less than the entry in column 2, write '0' in column 3. "If the "Highest Number Previously Paid For "IN THIS SPACE is less than 20, enter "30". "If the "Highest Number Previously Paid For "IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.												

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